Los Angeles County Sheriff's Department Officer Involved Shooting

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Banad Bata		Bureau/Station/Facility:								
Report Date: 05/13/	/15	Central Pa	trol Division/C	ompton St	ation	Admi	n. Invest.?		Hit?	V
			Incident Inform	nation						
URN:	015-05947-282	4-051	Date:	05/13	/15		Time:	1741	hour	S
City or Station:	Comp	ton	Nature of Incident			ممال سمام ا	الما والمتدر		Cula	lank
Location:			Subject then raised I			d deputies				Ject
North Long	Beach Bouleva	ırd	handgun, st			ection. De	p Juaie	Z III GU	H	
Location Type	Lighting (c	heck only one):	Incident Type (cf	eck one or m	ore):	Initiated by	(check on	ly one):		
(check one or more):	☐ Darkne	MER.	Accidental			Arrest	Warrant			
Backyard	Daylig		Armed Perso	n		Call				
Beach	Other	IK .	Fleeing Susp	ect		√ Obser	vation			
✓ Business		1 7-8-4-	Foot Pursuit				erson Unit			
Freeway	Street	Ligros	Gun Take Aw			Other				
Industrial	16 de male e a d	- K K	Moving Vehic			Search	Warrant			
Park		circle only one)	Sniper/Ambu	sh			erson Unit			
Parking Lot			Startle							
Residence	Cloudy	1	Struggie Invo	ived		Prior Activ	ity (check o	only one	1:	
Rural	Fog		Traffic Stop			☐ Detect	ive			
School	Rain		Unarmed Per	rson			Transport			
✓ Street			Unintentional			Other	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
0:1	Distance:	20 OF Fact	Vehicle Pursi	uit .		✓ Routin	- Detroi			
Other.		20-25 Feet	☐ Warrant Serv	rice		V) Rodan	e relioi			
Total # of Shots Fired by	y Deputy Total # of S	shots Fired by Suspect	Warning Sho	ŧ						
4		0	Other:	923's in a	area.	Aero L	hil?	Can	ne Unit	
			-							
			Employee Witi							
Employee #	Last Name		1 Name	M.t.		heck only one):	ShiftType			
	Av	iles	David	IMM	□ EM ✓	PM Day	✓ Regula:	Over	time	Off Duty
Employee #	Last Name	Fin	t Name	M.I.		heck only one): PM Day	ShiftType Regula	-	_	Off Duty
Employee #	Last Name	Fire	t Name	M.I.	ShiftTime (c	heck only one): PM Day	ShiftType Regular	(check o		Off Duty
		N	on-Employee V							
Last Name				First N					M.L.	
Street Address		City		Zip C		Work Ph		Home P		
Last Name				First N	łame				MJ.	
Street Address		City		Zip C	de	Work Ph		Home B		
Last Name				First N					M.J.	
Street Address		City		Zip C	ode	Work Ph		Home P	h	
			Superviso	ors						
Employee # Las	t Name	First I	iame	M.I.	(check one					
	Miller		Raiph	E.	On Dut	ly It during sho	oting _	Witnes Involve		-
Employee # Las	t Name	First	Varne	M.I.	(check on	e or more):		Witnes	s to sh	noting
1						y 1 during sho	oting [Involve	ed in sh	
	II and North		Watch Serg		irst Name			Ý.	M.	
Employee #	Last Name	Cruz			NA MAINE	Ulyss	ses		IVI.	Α.
			Watch Comm	nander		****				
-	D. and Miles		Autor Commi		irst Name				M.	L
Employee #	Last Name	Mitry			nai Hallis	Nab	eel		IWI.	S.

ar in the	
SH #	2379366

SUPPLEMENTAL NON-EMPLOYEE WITNESSES Los Angeles County Sheriff's Department

Page 2 of 5 Non-Employee Witnesses Last Name First Name M.L Street Address Work Ph Home Ph M.L Last Name First Name Zip Code Work Ph Street Address Home Ph Last Name First Name Zip Code Street Address Work Ph Last Name First Name M.I. Zip Code Street Address Work Ph Home Ph Last Name First Name M.I. Zip Code Work Ph Home Ph Street Address First Name M.I. Last Name Zip Code Work Ph Hame Ph Sireet Address First Name M.L Last Name Zip Code Home Ph Street Address Work Ph Last Name First Name M.I. Street Address Zip Code Work Ph Home Ph M.L Last Name First Name Zip Code Work Ph Home Ph Street Address Last Name First Name Zip Code Street Address Work Ph Home Ph M.L First Name Last Name Work Ph Home Ph ZIp Code Street Address M.L Last Name First Name Home Ph Zip Code Work Ph Street Address First Name M.I. Last Name Zip Code Work Ph Home Ph Street Address First Name Last Name Zip Code Work Ph Home Ph Street Address M.L. Last Name First Name Home Ph Street Address Zip Code Work Ph First Name Last Name Zip Code Home Ph Work Ph Street Address

Officer Involved Shooting Involved Employee Information

URN: 015-05947-2824-051

3 of 5 Page Involved Employee Last Name Employee # First Name M.I. E 1 Juarez Jaime NMI Sex: M Module, etc.): 287D1 Race Rank: Unit Assignment: Work Assignment (Unit #, Deputy Compton ShiftTime (circle only one): ShiftType (circle only one) Substance Used: Intoxication/Drug Usage? EM PM Day Regular Overtime Off Duty Hospital Name: Coroner Case # Hospital Admission? Coroner Case? Interviewed? Hrs of sleep prior to shooting: Duty Time (h Other Factors: Clothing (circle only one) Plain Clothes no Vest Uniform no Vest
Uniform w/ Vest Plain Clothes w/ Vest Age 5' 7" 157 Raid Jacket no Vest Range Qualification Date: PPC Qualification Date Laser Training Date: Number of Prior Certified with Weapon Prior Shootings? Patrol Certification? Certification Unit: Directed Force: Lised? Shootings: Weapons Fired Caliber # Shots Weapons Fired Caliber # Shots 9mm Sig Sauer Brand: Brand: Field Training Officer Emp # ast Name First Name M.I. Field Training Officer Emp # Last Name First Name M.L Employee # Last Name First Name M.L. E Sax Unit Assignment: Work Assignment (Unit #, Module, etc.): ShiftTime (circle only one): ShiftType (circle only one) Substance Used: Intoxication/Drug Usage? EM PM Day Regular Overtime Off Duty Hospital Name: Coroner Case # Hospital Admission? Coroner Case? Interviewed? [Hrs of sleep prior to shooting: Duty Time (hrs): Clothing (circle only one) Other Factors: Plain Clothes no Vest Reid Jeckel w/ Vest Age: Height: Uniform no Vest Uniform w/ Vest Weight: Plain Clothes w/ Vest Raid Jacket no Vest Range Qualification Date: PPC Qualification Date Laser Training Date: Certified with Weapon Number of Prior Patrol Certification? [Certification Unit: Prior Shootings? Directed Force: Used? Shootings Weapons Fired Caliber # Shots Weapons Fired Caliber # Shats Brand: Brand: Field Training Officer Emp # Last Name First Name M.L Field Training Officer Emp # Last Name First Name M.I. Employee # Last Name First Name M.I. E Sex Race Rank: Unit Assignment: Nork Assignment (Unit #, Module, etc.): ShiftTime (circle only one): ShiftType (circle only one) Substance Used: Intoxication/Drug Usage? ☐ EM ☐ PM ☐ Day Regular Overtime Off Duty Hospital Name: Coroner Case # Hospital Admission? Coroner Case? [interviewed? Hrs of sleep prior to shooting: Duty Time (hrs): Clothing (circle only one) Other Factors Plain Clothes no Vest Height: Uniform no Vest Age: Weight: Plain Clothes w/ Vest Raid Jacket no Vest Uniform w/ Vest Range Qualification Date: PPC Qualification Date Laser Training Date: Certified with Wespon Number of Prior Patrol Certification? [Certification Unit: Prior Shootings? Directed Force: Used? Shootings: Weapons Fired # Shots Caliber Weapons Fired Caliber # Shots Brand: Brand Field Training Officer Emp# M.I. Last Name First Name Field Training Officer Emp# Last Name First Name MJ.

Officer Involved Shooting Suspect Information

URN:

015-05947-2824-051

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_			Suspect	Information				
s 1	Last Name			First Name		M.L.		
	AKA Last Name			First Name		M.I.		
	Sex: M Race: B	Street Address		City		State & Zip Code		
	Work Phone:	Home Phone:	Social Sec	curiby #	Driver's License			
	Age: 17 D.G.B.	Height: 5' 11" Weight: 180	FBI#		CII#			
	Booking #	Primary Charge: 245(a)(1	1) P.C.	Secondary Charge				
	Coronar Case?	Coroner Case#		Introducation/Drug Usage?	Substance Used: Mar	ijuana		
	Armed?	Apprehended?		Mental Illness?	Criminal History?			
	Vehicle Make			Model:	Year:			
s	Last Name			First Name		M.I.		
	AKA Last Name				M.I.			
	Sex: Race:	Street Address		City		State & Zip Code:		
	Work Phone:	Home Phone:	Social Sec	curity #:	Driver's License #:			
	Age: D.O.B.	Height: Weight:	FBI#		Cii#			
	Booking #	Primary Charge	1	Secondary Charge	s:			
	Coroner Case?	Coroner Case#		Intoxication/Drug Usage?	Substance Used:			
	Armed?	Apprehended?	_	Mental liness?	Criminal History?			
	Vehicle Make			Model:	Year:	-		
s	Last Name	-		First Name		M.I.		
9	AKA Last Name First Name							
	Sex: Race:	Street Address		City		M.I. State & Zip Code:		
	Work Phone:	Home Phone:	Social Sec		Driver's License #:			
	Age: D.O.B.	Height: Weight;	FBI#		Cil#			
	Booking #	Primary Charge:	1.5	Secondary Charge	2			
		Coroner Case #						
	Coroner Case?			Intoxication/Drug Usage?	Substance Used:			
	Armed? Vehicle Make	Apprehended?	-	Mental Illness?	Criminal History? Year:			
\$	Last Name AKA Last Name			First Name		M.I.		
	WW Dast Island.		First Name		M.L			
	Sex: Race:	Street Address:		City	State & Zip Code:			
	Work Phone:	Home Phone:	Social Sec	usity #:	Driver's License #:			
	Age: D.O.B.	Height: Weight:	FB1#		CII#			
	Booking #	Primary Charge:		Secondary Charge				
	Coroner Case?	Coroner Case #		Intoxication/Drug Usage?	Substance Used:	Substance Used: Criminal History? Year:		
1	Armed?	Apprehended?		Mental Illness?	Criminal History?			
ŀ	Vehicle Make			Model:				

Officer Involved Shooting

URN:

015-05947-2824-051

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-					Rollout Informa	tlon		tus . We	4.		
Arrival	Date 05/13/1	5	mival Time	1857	Date Submitted	08/22/18	Date of R	recommendation			
Emplo		Name		Die	Z	First N	ame	Justin		M.I.	R.
Employ	yee # Last	Name		Gro	le	First N	ame	Dinah		M,i,	L.
Employ	yee # Last	Name	***	Peace		First N	ame	Daniel		M.I.	1
					ing / Force Inf	ormation		Daniel	As a		
Meth	od						pe of Inju	in.	Body	Part I	njured
(AW) (BC) (BI) (CCR) (CT) (TD) (CCC) (TT) (CCC) (TT) (FR) (FR) (FS) (FB) (FB)	Arwen Baton:(Control) Baton:(Impact) Bodily Fluida Canine Carotid Restraint Choke Hold Control Holds:(Control Control Holds:(Team 1 Control Holds:(Team 2 Control Holds:(Team 3 Control Holds:(Team 4	akedown) wm) Spray) r Gas)	(OB) (OO) (PY) (PS) (PH) (PP) (RS) (CN) (RH) (HB) (TP) (RE) (SP) (SH) (SG) (SB) (ST) (TR)	Other Weapo Personal Wer Personal Wer Personal Wer Personal Wer Resistance Restraint Dev Restraint Dev Restraint Dev Restraint Dev Restraint Dev	n: Blunt Object n: Other apon: Feet/Leg: (Kick apon: Feet/Leg: (Swe apon (Hand/Arm) apon (Other) apon (Other) ice (Capture Nel) ice (Handcuffs) ice: Hobble (Legs On ice: Hobble (TARP) ice: REACT Belt	(AS (BR (BR) (CF (CC (DH (DI) (DE (CS) (CS)	Abrasion Bruise Bruise Complai Concust Conc	nt of Pain sion lon Bit Bite ons emage samage s b Wound sue Damage wists	ADK ARR (BT) (CEL) (FE) (GRD) (HT) (CEL) (FE) (GRD) (HT) (HT) (ST)	Abdon Ankle Arm Back Buttoc Chest Elbow Face Feet Finger Genita Groin Hand Hip Internat Knees Leg Nack Shoult	rien ka s s sals
Bran (AK) (BN) (BR) (CO) (CO) (DA) (GL) (HA) (HI) (HK)	of AK-47 Benelli Beretta Browning Charter Arms Cott Davis Industries Glock Harrington & Richards Hi Standard H & K Ithics	(IV) (JE) (LO) (LU) (MA) (MO) (NC) (NA) (NO) (RA) (RM) (RM) (RM)	Iver Johnson Jennings Lordin Luger Marlin Mossberg NCI aka SKS North America Norinco Raven Remington RG		Rossi Smith & Wesson Sturm Ruger SIG Sauer Sterling Taurus Weatherby Winchester US Government Handmade (Inmate) Homemade (Non-In- Other Brand	(9) (10) (12)	,	(24) .243 ca (25) .25 cal (30) .308 ca (35) .357 ca (36) 30-60 (38) .38 cal	(WR)	44) .4 45) .4 50) 50 SL) SI	10 guage 4 caliber 5 caliber 5 mm lug ther calibe

FORCE APPLIED (one code per block)

Used By (E# or S#)	Used Against (E# or S#)	Method (Code)	Brand (Code)	Caliber (Code)	Authorized Weapon? (Y/N)	Authorized Ammunition? (Y/N)	Type of injury (Code)	Body Part (Code)
\$	E	FH	HI	22			NN	
E	S	FH	SS	9	Y	Y	GS	LE
					-		-	_

COUNTY OF LOS ANGELES SHERIFF'S DEPARTMENT

INVESTIGATIVE SUMMARY

ADDENDUM

INCIDENT:

On-Duty Hit Shooting, Suspect Injured

IAB FILE #:

SH 2379366

URN #:

015-05947-2824-051

DATE/TIME:

May 13, 2015 / 1741 hours

LOCATION:

North Long Beach Boulevard, Compton

SUMMARY

On August 6, 2018, upon reviewing the completed Homicide case book, it was noted Homicide investigators located surveillance cameras on the light poles, at the intersection of Long Beach Boulevard and Compton Boulevard [Exhibit A, page 58]. There was no indication in the Homicide case book if there was an attempt made to retrieve any potential video of the incident.

The IAB investigator contacted Sergeant Sandra Nava, Homicide Bureau, and inquired about the potential surveillance footage. Sergeant Nava prepared a supplemental report describing the inquiry Homicide investigators made regarding potential surveillance footage [Miscellaneous Documents].